PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

M-15228 US

		CLAIMS AS	FILED - (Column					SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			14					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	SASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			/ // minus 20=		* .		ſ	X\$ 9=		OR	X\$18=	,	
INDEPENDENT CLAIMS			3^{min}	nus 3 =	*		t	X42=		OR	X84=		
MU	LTIPLE DEPEN	ESENT				<u> </u>	+140=	7		+280=			
* If the difference in column 1 is less than zero, enter "0" in column 2							Ł	TOTAL		OR	TOTAL	75	
CLAIMS AS AMENDED - PART II								TOTAL	السيبيسي	OR	OTHER	750 THAN	
(Column 1) (Column 2) (Column 3)							<u> </u>	SMALL ENTITY			SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus .	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42≐		OR	X84=		
L.	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	CLAIM			+140=		OR	+280=	"	
						,	L	TOTAL			TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)								DDIT. FEE			ADDIT. FEET		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF M	Minus	***	CL AIM	=		X42=		OR	X84≃		
<u> </u>	FIRST PRESE	NIATION OF MI	JUIPLE DEF	PINDEIN	CLANIVI		1	+140=		OR	+280=		
							. Al	TOTAL DDIT. FEE		QR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu		(Column 3)						<u> </u>	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	•			PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM		1 -	+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OB	TOTAL ADDIT. FEE		
		nber Previously Pa					er foun	d in the app	ropriate box	k in co	lumn 1.		